20170213 duplicaté

OMB# 2050-0024; Expires 01/31/2017

FOI The	MPLETED RM TO: Appropriate te or Regional	United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM						
1. Reason for Submittal: □ To provide an Initial Notification (first time submitting site identification information / to obtain an EPA ID nu for this location) MARK ALL BOX(ES) THAT APPLY □ As a component of a First RCRA Hazardous Waste Part A Permit Application □ As a component of the Hazardous Waste Report (If marked, see sub-bullet below)								
		Site was a TSD facility and/or generator of >1,000 kg of hazardous waste, >1 kg of acute hazardous waste, of >100 kg of acute hazardous waste spill cleanup in one or more months of the report year (or State equivalen LQG regulations)						
2.	Site EPA ID Number	EPA ID Number T X R 0 0 0 8 0 5 8 5 V	h ul.					
3.	Site Name	Name: WALMART NEIGHBORHOOD MARKET #5985						
4.		Street Address: 2201 SOUTHLAKE BOULEVARD						
	Information	City, Town, or Village: SOUTHLAKE	County: TARRANT					
		State: TX Country: USA	Zip Code: 76092					
5.	Site Land Type	Private County District Federal Tribal Municipal S	tate UOther					
6.	NAICS Code(s) for the Site	A. 4 5 2 9 1 0 C.						
	(at least 5-digit codes)	B D						
7.	Site Mailing	Street or P.O. Box: P.O. BOX 8041						
	Address	City, Town, or Village: BENTONVILLE						
		State: AR Country: USA	Zip Code: 72712-8041					
8.	Site Contact	First Name: ROSE MI: Last: ARNOLD						
	Person	Title: SENIOR MANAGER						
		Street or P.O. Box: P.O. BOX 8041						
		City, Town or Village: BENTONVILLE						
		State: AR Country: USA	Zip Code: 72712-8041					
	К	Email: rose.arnold@walmart.com						
		Phone: 479-277-8972 Ext.:	Fax: 479-204-9675 Date Became					
9.	Legal Owner and Operator	A. Name of Site's Legal Owner: WAL-MART STORES TEXAS, LLC.	Owner: 05/16/2012					
	of the Site	Owner Type: Private County District Federal Tribal Municipal	State Other					
Street or P.O. Box: P.O. BOX 8041								
		City, Town, or Village: BENTONVILLE	Phone: 479-277-8972					
			Zip Code: 72712-8041					
	F		Date Became Operator: 05/16/2012					
		Operator Type: Private County District Federal Tribal Municipal	State Other					

EPA Form 8700-12, 8700-13 A/B, 8700-23

1075339

Page1 of 4

 Type of Regulated Waste Activity (at your site) Mark "Yes" or "No" for all current activities (as of the date submitting the 	ne form); complete any additional boxes as instructed.
A. Hazardous Waste Activities; Complete all parts 1-10.	
Y N N 1. Generator of Hazardous Waste If "Yes," mark only one of the following – a, b, or c.	Y N Z 5. Transporter of Hazardous Waste If "Yes," mark all that apply.
Generates, in any calendar month, 1,000 kg/mo (2,200 lbs/mo.) or more of hazardous waste; or Generates, in any calendar month, or accumulates at any time, more than 1 kg/mo (2.2 lbs/mo) of acute hazardous waste; or Generates, in any calendar month, or accumulates at any time, more than 100 kg/mo (220 lbs/mo) of acute hazardous spill cleanup material.	a. Transporter b. Transfer Facility (at your site) Y N ✓ 6. Treater, Storer, or Disposer of Hazardous Waste Note: A hazardous waste Part B permit is required for these activities. Y N ✓ 7. Recycler of Hazardous Waste
b. SQG: 100 to 1,000 kg/mo (220 – 2,200 lbs/mo) of non-acute hazardous waste.	
c. CESQG: Less than 100 kg/mo (220 lbs/mo) of non-acute hazardous waste.	Y N S Exempt Boiler and/or Industrial Furnace If "Yes," mark all that apply.
If "Yes" above, indicate other generator activities in 2-10.	a. Small Quantity On-site Burner Exemption
Y N 2. Short-Term Generator (generate from a short-term or one-time event and not from on-going processes). If "Yes," provide an explanation in the Comments section.	b. Smelting, Melting, and Refining Furnace Exemption
Y N ✓ 3. United States Importer of Hazardous Waste	Y N ✓ 9. Underground Injection Control
Y N 4. Mixed Waste (hazardous and radioactive) Generator	Y ☑ N ☑ 10. Receives Hazardous Waste from Off-site
B. Universal Waste Activities; Complete all parts 1-2.	C. Used Oil Activities; Complete all parts 1-4.
Y N V 1. Large Quantity Handler of Universal Waste (you accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste managed at your site. If "Yes," mark all that apply.	Y N 7 1. Used Oil Transporter If "Yes," mark all that apply. a. Transporter b. Transfer Facility (at your site)
a. Batteries	Y N 2. Used Oil Processor and/or Re-refiner If "Yes," mark all that apply. a. Processor
c. Mercury containing equipment	b. Re-refiner
d. Lamps e. Other (specify)	Y N 3. Off-Specification Used Oil Burner
f. Other (specify)	Y N 4. Used Oil Fuel Marketer If "Yes," mark all that apply.
Y N 2. Destination Facility for Universal Waste Note: A hazardous waste permit may be required for this activity.	a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner b. Marketer Who First Claims the Used Oil Meets the Specifications

D.	 Eligible Academic Entities with Laboratories—Notification for opting into or withdrawing from managing laboratory hazardous wastes pursuant to 40 CFR Part 262 Subpart K 							
	❖ Ye	ou can ONLY Opt	into Subpart K if:					
	 you are at least one of the following: a college or university; a teaching hospital that is owned by or has a formal affiliation agreement with a college or university; or a non-profit research institute that is owned by or has a formal affiliation agreement with a college or university; AND 							
	•	you have checke	d with your State to de	termine if 40 CFR	Part 262 Subpa	rt K is effective	in your state	
Υ[□N✓		currently operating und					
			by-item instructions	for definitions of	types of eligible	e academic en	tities. Mark all that	tapply:
		∐a. College o	•					
			Hospital that is owne	_		_	_	_
		c. Non-profit	t Institute that is own	ed by or has a fo	ormal written aff	iliation agreem	ent with a college	or university
Υ[□NV	2. Withdrawing fr	om 40 CFR Part 262 S	Subpart K for the r	management of h	azardous wast	es in laboratories	
11.	Descrip	tion of Hazardous	s Waste					
Α.	your site		ly Regulated Hazardo order they are present					
В.	Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-Regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed.							
			·					

						2		
				6. La constitution de la constit				

12.	Notificat	ion of Hazardous Secondary Mate	rial (HSM) Activity			
Υ[Are you notifying under 40 CFR 260.42 that you will begin managing, are managing, or will stop managing hazardous secondary material under 40 CFR 261.2(a)(2)(ii), 40 CFR 261.4(a)(23), (24), or (25)?					
		If "Yes," you must fill out the Addend Material.	dum to the Site Identification Form: Notification	for Managing Hazardous Secondary		
13.	3. Comments					
Plea	ise deactiv	rate the EPA ID. Facility operations	have ceased.	, supplied to		
			10000			

		313344				
			·	All		
				1977-24-1-1979-2-1		
14.	on my inq information penalties	De with a system designed to assure uiry of the person or persons who many or submitted is, to the best of my kno for submitting false information, inclu	at this document and all attachments were prepart that qualified personnel properly gather and evanage the system, or those persons directly resulted and belief, true, accurate, and completed the possibility of fines and imprisonment full owner(s) and operator(s) must sign (see 40 Compared).	raluate the information submitted. Based sponsible for gathering the information, the set. I am aware that there are significant or knowing violations. For the RCRA		
Sig aut	nature of horized re	legal owner, operator, or an presentative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)		
r	<u> </u>	Upold	ROSE ARNOLD, SENIOR MANAGER	12/27/2016		

2016/011

OMB# 2050-0024; Expires 01/31/2017

10	20	14

FC Th Sta	END DMPLETED DRM TO: lee Appropriate ate or Regional fice.	United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM						
1.	Submittal	Reason for Submittal: To provide an Initial Notification (first time submitting site identification information / to obtain an EPA ID number for this location)						
I	MARK ALL BOX(ES) THAT APPLY	 ✓ To provide a Subsequent Notification (to update site identification information for this loca ✓ As a component of a First RCRA Hazardous Waste Part A Permit Application ✓ As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amend ✓ As a component of the Hazardous Waste Report (If marked, see sub-bullet below) 	2					
		Site was a TSD facility and/or generator of >1,000 kg of hazardous waste, >1 kg of acute hazardous waste, of >100 kg of acute hazardous waste spill cleanup in one or more months of the report year (or State equivalen LQG regulations)						
2.	Site EPA ID Number	EPA ID Number T X R 0 0 0 8 0 5 8 5						
3.	Site Name	Name: WALMART NEIGHBORHOOD MARKET #5985						
4.	Site Location Information	Street Address: 2201 SOUTHLAKE BOULEVARD						
	iniormation	City, Town, or Village: SOUTHLAKE	County: TARRANT					
		State: TX Country: USA	Zip Code: 76092					
	Site Land Type	☑ Private ☐ County ☐ District ☐ Federal ☐ Tribal ☐ Municipal ☐ S	State Other					
6.	NAICS Code(s) for the Site	A. 4 5 2 9 1 0 C.						
	(at least 5-digit codes)	B D						
7.	Addrage	Street or P.O. Box: P.O. BOX 8041						
		City, Town, or Village: BENTONVILLE						
		State: AR Country: USA	Zip Code: 72712-8041					
8.	Site Contact Person	First Name: ROSE MI: Last: ARNOLD						
		Title: SENIOR MANAGER						
	Ī	Street or P.O. Box: P.O. BOX 8041	-					
		City, Town or Village: BENTONVILLE						
	1	State: AR Country: USA	Zip Code: 72712-8041					
	1	Email: rose.arnold@walmart.com Phone: 479-277-8972 Ext.:						
9.			Fax: 479-204-9675 Date Became					
٥.	and Operator	A. Name of Site's Legal Owner: WAL-MART STORES TEXAS, LLC Owner 71	Owner: 5/16/2012					
	of the Site	Type: Private County District Federal Tribal Municipal	State Other					
	-	Street or P.O. Box: P.O. BOX 8041						
	-	City, Town, or Village: BENTONVILLE	Phone: 479-277-8972					
			Zip Code: 72712-8041					
			Date Became Operator: 5/16/2012					
		Operator ☑ Private ☐ County ☐ District ☐ Federal ☐ Tribal ☐ Municipal	State Other					

EPA Form 8700-12, 8700-13 A/B, 8700-23

Page1 of 4

1046557

99 (28 g 23)

 Type of Regulated Waste Activity (at your site) Mark "Yes" or "No" for all current activities (as of the date submitting the 	form); complete any additional boxes as instructed.
A. Hazardous Waste Activities; Complete all parts 1-10.	. '
Y N V 1. Generator of Hazardous Waste If "Yes," mark only one of the following – a, b, or c.	Y N V 5. Transporter of Hazardous Waste If "Yes," mark all that apply.
a. LQG: Generates, in any calendar month, 1,000 kg/mo (2,200 lbs/mo.) or more of hazardous waste; or Generates, in any calendar month, or accumulates at any time, more than 1 kg/mo	a. Transporter b. Transfer Facility (at your site)
(2.2 lbs/mo) of acute hazardous waste; or Generates, in any calendar month, or accumulates at any time, more than 100 kg/mo (220 lbs/mo) of acute hazardous spill cleanup material.	Y N ✓ 6. Treater, Storer, or Disposer of Hazardous Waste Note: A hazardous waste Part B permit is required for these activities. Y N ✓ 7. Recycler of Hazardous Waste
100 to 1,000 kg/mo (220 – 2,200 lbs/mo) of b. SQG: non-acute hazardous waste.	
c. CESQG: Less than 100 kg/mo (220 lbs/mo) of non-acute hazardous waste.	Y N A 8. Exempt Boiler and/or Industrial Furnace If "Yes," mark all that apply.
If "Yes" above, indicate other generator activities in 2-10.	a. Small Quantity On-site Burner Exemption b. Smelting, Melting, and Refining
Y N 2. Short-Term Generator (generate from a short-term or one-time event and not from on-going processes). If "Yes," provide an explanation in the Comments section.	Furnace Exemption
Y N ✓ 3. United States Importer of Hazardous Waste	Y N ✓ 9. Underground Injection Control
Y N 4. Mixed Waste (hazardous and radioactive) Generator	Y N ✓ 10. Receives Hazardous Waste from Off-site
B. Universal Waste Activities; Complete all parts 1-2.	C. Used Oil Activities; Complete all parts 1-4. y □ N ☑ 1. Used Oil Transporter
Y N 1. Large Quantity Handler of Universal Waste (you accumulate 5,000 kg or more) [refer to your State	Y N Y 1. Used Oil Transporter If "Yes," mark all that apply. a. Transporter
regulations to determine what is regulated]. Indicate types of universal waste managed at your site. If "Yes," mark all that apply.	
a. Batteries	Y N 2. Used Oil Processor and/or Re-refiner If "Yes," mark all that apply.
b. Pesticides	a. Processor
c. Mercury containing equipment d. Lamps	b. Re-refiner
e. Other (specify)	Y N 3. Off-Specification Used Oil Burner
f. Other (specify)	Y N 4. Used Oil Fuel Marketer If "Yes," mark all that apply.
Y N 2. Destination Facility for Universal Waste Note: A hazardous waste permit may be required for this activity.	a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner b. Marketer Who First Claims the Used
The second secon	Oil Meets the Specifications

D.	Eligible wastes	Academic Entitions of the Academic Entition (Control of the Academic Entitle Entit Entit Entit Entit Entit Ent	ties with Laborator CFR Part 262 Subp	ies—Notification art K	for opting into or w	ithdrawing from m	anaging labo	ratory hazardous
	* Y	ou can ONLY Op	ot into Subpart K if:					
	 you are at least one of the following: a college or university; a teaching hospital that is owned by or has a formal affiliation agreement with a college or university; or a non-profit research institute that is owned by or has a formal affiliation agreement with a college or university; AND 							
	 you have checked with your State to determine if 40 CFR Part 262 Subpart K is effective in your state 							
Υ[1. Opting into or currently operating under 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories							
		_	n-by-item instruction or University	ons for definitions	s of types of eligible	academic entities	s. Mark all tha	t apply:
			•	umad bu ar baa a	formed weither office	!= 4! =	.141 11	
					formal written affil			
		c. Non-pro	in memute that is	owned by or has a	a formal written affi	nation agreement	with a college	or university
Υ[□N▼	2. Withdrawing	from 40 CFR Part 2	62 Subpart K for t	he management of h	azardous wastes in	laboratories	
11.	Descrip	tion of Hazardo	us Waste	VARALUS.				
Α.	your site	codes for Feder List them in the are needed.	ally Regulated Haz e order they are pre	ardous Wastes. I sented in the regu	Please list the waste lations (e.g., D001, D	codes of the Federa 0003, F007, U112).	al hazardous w Use an additio	rastes handled at onal page if more
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							· · · · · · · · · · · · · · · · · · ·	
							·	
					444444			
						-		
					1			
В.	hazardo	odes for State- us wastes handlare needed.	Regulated (i.e., nor ed at your site. List	n-Federal) Hazard them in the order t	ous Wastes. Please they are presented in	e list the waste code the regulations. Us	es of the State- se an additions	Regulated Il page if more
		:						
	-					7		
-								
			THE CONTRACTOR OF THE CONTRACT			- Control of the Cont		

Notificat	ion of Hazardous Secondary Mater	ial (HSM) Activity	AND THE RESERVE OF THE PROPERTY OF THE PROPERT
□N⊄	Are you notifying under 40 CFR 260 secondary material under 40 CFR 2	.42 that you will begin managing, are managing 61.2(a)(2)(ii), 40 CFR 261.4(a)(23), (24), or (25	g, or will stop managing hazardous)?
	If "Yes," you must fill out the Addend Material.	lum to the Site Identification Form: Notification	for Managing Hazardous Secondary
Commer	its	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
LMART IS	NOTIFYING TO DEACTIVATE THIS EP	A ID. FACILITY OPERATIONS HAVE CEASED.	
			<u> </u>
			· .
	•		
accordar on my in informati penalties	nce with a system designed to assure quiry of the person or persons who n ion submitted is, to the best of my kn s for submitting false information, incl	nat this document and all attachments were pre- that qualified personnel properly gather and e- nanage the system, or those persons directly re- owledge and belief, true, accurate, and comple- uding the possibility of fines and imprisonment all owner(s) and operator(s) must sign (see 40	valuate the information submitted. Based esponsible for gathering the information, to te. I am aware that there are significant for knowing violations. For the RCRA
ignature o uthorized	f legal owner, operator, or an representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)
r	-apoll	ROSE ARNOLD, SENIOR MANAGER	9/29/2016
	:		



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION 6 1445 ROSS AVENUE, SUITE 1200 DALLAS TX 75202-2733

May 21, 2012

Wal-Mart Supercenter #5985 ATTN: Justin Wilson P.O. Box 8041 Bentonville, AR 72712-8041

To Whom It May Concern:

This letter is to serve as notification that your Notification of Regulated Waste Activity Form (8700-12) has been received and processed. Your EPA ID number is:

TXR000080585

Future updates to your generator status, owner/operator information or other inquiries should be sent to your state environmental agency:

Texas Commission on Environmental Quality Permitting and Registration Support Division Registration and Reporting Section, MC129 P.O. Box 13087 Austin, TX 78711-3087 512-239-6413

Sincerely,

Sontina S. Powell Environmental Protection Specialist EPA, Region 6 Multimedia Planning and Permitting Division

A. A	6 L
	The state of the s
	TO THE PARTY OF TH
	KANANAT HILITETZI ZIZIZI ZIZIZI ZIZIZI ZIZIZI ZIZIZI ZIZIZI ZIZIZI ZIZIZIZI ZIZIZIZIZI ZIZIZIZIZIZI ZIZIZIZIZIZI ZIZIZIZIZIZI ZIZIZIZIZIZIZI ZIZIZIZIZIZI ZIZIZIZIZIZI ZIZIZIZIZIZI ZIZIZIZIZIZI ZIZIZIZIZI ZIZIZIZIZIZI ZIZIZIZIZIZI ZIZIZIZIZIZI ZIZIZIZIZIZI ZIZIZIZIZIZI ZIZIZIZIZIZI ZIZIZIZIZIZI ZIZIZIZIZIZIZI ZIZIZIZIZIZIZIZI ZIZIZIZIZIZIZIZIZI ZIZIZIZIZIZIZI ZIZIZIZIZIZIZI ZIZIZIZIZIZIZIZI ZIZIZIZIZIZI ZIZIZIZIZIZIZI ZIZIZIZIZIZIZIZIZI ZIZIZIZIZIZIZIZIZIZIZIZIZIZIZIZIZIZIZIZI
	NANCOSABILIDA Albantiarini di decidenti della codi perconegnica di constanti di con
	DOSONIAN (CARANTAL DE LA CARANTAL DE
	PROVIDENCE PROGRAMMENT AND
	nnen wee 222 224 eek ee soo wa ee soo waa ka
	TROOGLEG SHEELENSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDERSTANDE
	полимания правиля неготопостический политольного политоль
	воезиллена і лючнови воезинови за верхими.
	Augment entre soon Etizonee vonn een annet (en consonnaiste von soon ander von soon and von soo

5/18/12

) -	
FOF The	MPLETED RM TO: Appropriate e or Regional	United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM					
	Reason for Submittal MARK ALL OX(ES) THAT APPLY	Reason for Submittal: ☐ To provide an Initial Notification (first time submitting site identification information / to obtain an EPA ID number for this location) ☐ To provide a Subsequent Notification (to update site identification information for this location) ☐ As a component of a First RCRA Hazardous Waste Part A Permit Application ☐ As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #)					
		☐ As a component of the Hazardous Waste Report (If marked, see sub-bullet below) ☐ Site was a TSD facility and/or generator of ≥1,000 kg of hazardous waste, >1 kg of acute hazardous waste, or >100 kg of acute hazardous waste spill cleanup in one or more months of the report year (or State equivalent LQG regulations)					
2.	Site EPA ID Number	EPA ID Number 11 X R 10 0 0 8 0 15 8 5					
3.	Site Name	Name: Walmart Neighborhood Market	t #5985				
4.	Site Location Information	Oity, Total, or Timeger			County: Tarrant Zip Code: 76092 ~ 4700		
5.	Site Land Type				lunicipal State	Other	
6.	NAICS Code(s)		1 0	с			
	for the Site (at least 5-digit codes)	В.		D			
7.	Site Mailing	Street or P.O. Box: P.O. Box 8041		And 24 To 2			
	Address	City, Town, or Village: Bentonville	-r		Т		
		State: AR	Country: U		Zip Code: 72712-8041		
8.	Site Contact	First Name: Justin	MI:	Last: Wilson			
	Person	Title: Senior Manager					
		Street or P.O. Box: P.O. Box 8041					
		City, Town or Village: Bentonville	1 .	10.4	T		
		State: AR	Country: \	JSA	Zip Code: 72712-8041		
		Email: justin.p.wilson@wal-mart.com			470 204 0675	····	
<u> </u>		Phone: 479-204-3517		d:	Pax: 479-204-9675 Date Became 4/23/20	2	
9.	Legal Owner and Operator of the Site	A. Name of Site's Legal Owner: Wal	A. Name of Site's Legal Owner: Wal-Mart Stores Texas, LLC Owner Type: Private County District Federal Tribal		Owner: 4/25/20 Municipal State		
	,	Street or P.O. Box: P.O. Box 8041					
		City, Town, or Village: Bentonville Phone:			Phone: 479-204-3517		
		State: AR	Country:	JSA	Zip Code: 72712-804		
		B. Name of Site's Operator: Wal-Ma			Date Became 4/23/20	12	
		Operator Type: Private Count	y District	Federal Tribal	Municipal State	Other	

EPA Form 8700-12, 8700-13 A/B, 8700-23 (Revised 12/2011)

TB

Registration and Reporting Section

EPA ID Numb	er			OMB#: 2050-0024; Expires 12/31/2014
10. Type of Re Mark "Yes	egulated Waste " or "No" for al	Activity (at your site)	the date submitting the	e form); complete any additional boxes as instructed.
A. Hazardous	Waste Activitie	es; Complete all parts 1-1	0.	
Y ∑ N□ ·		f Hazardous Waste rk only one of the followir	ng – a, b, or c.	Y N 5. Transporter of Hazardous Waste If "Yes", mark all that apply.
	a. LQG:	Generates, in any calenda (2,200 lbs./mo.) or more of Generates, in any calenda accumulates at any time, r lbs./mo) of acute hazardou Generates, in any calenda accumulates at any time, r (220 lbs./mo) of acute hazarmaterial.	f hazardous waste; or r month, or nore than 1 kg/mo (2.2 is waste; or r month, or nore than 100 kg/mo	a. Transporter b. Transfer Facility (at your site) Y N 6. Treater, Storer, or Disposer of Hazardous Waste Note: A hazardous waste Part B permit is required for these activities.
	b. sQG:	100 to 1,000 kg/mo (220 – acute hazardous waste.	2,200 lbs./mo) of non-	Y N 7. Recycler of Hazardous Waste
4	CESQG:	Less than 100 kg/mo (220 hazardous waste.	•	Y N 8. Exempt Boiler and/or Industrial Furnace If "Yes", mark all that apply. a. Small Quantity On-site Burner Exemption
	. Short-Term Ge event and not fi	enerator (generate from a s from on-going processes). I the Comments section.	short-term or one-time	b. Smelting, Melting, and Refining Furnace Exemption
Y N ✓ 3.	United States	Importer of Hazardous W	/aste	Y N 9. Underground Injection Control
Y N	. Mixed Waste ((hazardous and radioactiv	re) Generator	Y N N N N N N N N N N N N N N N N N N N
B. Universal V	Waste Activities	s; Complete all parts 1-2.		C. Used Oil Activities; Complete all parts 1-4.
Y NZ	accumula regulation	antity Handler of Universa te 5,000 kg or more) [refe ns to determine what is re iniversal waste managed hat apply.	r to your State gulated]. Indicate	Y N 1. Used Oil Transporter If "Yes", mark all that apply. a. Transporter b. Transfer Facility (at your site)
	d. Lamps e. Other (s f. Other (s	•		Y N 2. Used Oil Processor and/or Re-refiner if "Yes", mark all that apply. a. Processor b. Re-refiner Y N 3. Off-Specification Used Oil Burner
Y NZ	2. Destination	on Facility for Universal W azardous waste permit may		4. Used Oil Fuel Marketer If "Yes", mark all that apply. a. Marketer Who Directs Shipment of Off- Specification Used Oil to Off- Specification Used Oil Burner b. Marketer Who First Claims the Used Oil Meets the Specifications

EPA ID Number	• [] []			OMB#	: 2050-0024; Expi	res <u>12/31/2014</u>						
	demic Entities with L uant to 40 CFR Part		cation for opting in	to or withdrawing fro	om managing labor	atory hazardous						
You ca	n ONLY Opt into Sub	part K if:										
agre	 you are at least one of the following: a college or university; a teaching hospital that is owned by or has a formal affiliation agreement with a college or university; or a non-profit research institute that is owned by or has a formal affiliation agreement with a college or university; AND 											
• you	have checked with yo	our State to determine	e if 40 CFR Part 262	Subpart K is effective	in your state							
Y N 1. 0												
	a. College or University											
	- .	-		ffiliation agreement wi								
	c. Non-profit Institute that is owned by or has a formal written affiliation agreement with a college or university											
Y N 2. Withdrawing from 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories												
11. Description	of Hazardous Waste											
your site. Lis	Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.											
D001	D002	D003	D004	D005	D006	D007						
D008	D009	D010	D011	D016	D018	D022						
D024	D026	D027	D035	D039	P001	P075						
U002	U034	U035	U058	U072	U080	U122						
U129	U132	U150	U154	U159	U165	U182						
U188	U200	U205	U249	U279	U409	U411						
B. Waste Code hazardous w spaces are r	astes handled at you	d (i.e., non-Federal) r site. List them in th	Hazardous Wastes e order they are pres	. Please list the wast ented in the regulation	e codes of the State ns. Use an addition	Regulated al page if more						
			1									

EP	A ID Nun	nber						OME	#: 2050-0024; Expires 12/31/2014
12.	Notifica	ion of Hazardous	Secondary N	laterial (F	ISM) Ac	tivity			
Y	_ N ∠	secondary materi	al under 40 Cl	FR 261.2(a	a)(2)(ii),	40 CFR 26	1.4(a)(23), (24),	or (25)	, or will stop managing hazardous ? or Managing Hazardous Secondary
13.	Comme	Material.							
13.	Comme						·····		The state of the s
				·			,		
		WOLL C					,		

		- 11 1006 1008							
		· · · · · · · · · · · · · · · · · · ·							AND THE RESERVE TO THE PARTY OF
			, , <u>, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>					.,	
14. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations. For the RCRA Hazardous Waste Part A Permit Application, all owner(s) and operator(s) must sign (see 40 CFR 270.10(b) and 270.11).									
Signature of legal owner, operator, or an authorized representative			Nai	Name and Official Title (type or print)			t)	Date Signed (mm/dd/yyyy)	
		Justo till	econ)		Justir	າ Wilson, Se	nior Manager		04/02/2012
		· Wheel	•						
			· · · · · · · · · · · · · · · · · · ·						